

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street)

1444 DUKE STREET

Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00255695

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2023

through

M M M / D D D / Y Y Y Y Y Y
04 30 2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hagopian, Todd, Christopher, ,

Type or Print Name of Treasurer

Signature of Treasurer

Hagopian, Todd, Christopher, ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
05 19 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2023

To:

M M	/	D D	/	Y Y Y Y Y
04		30		2023

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2023</div>		<div>255395.26</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>254452.92</div>	
(c) Total Receipts (from Line 19)	<div>95043.60</div>	<div>334190.70</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>349496.52</div>	<div>589585.96</div>
7. Total Disbursements (from Line 31).....	<div>82588.36</div>	<div>322677.80</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>266908.16</div>	<div>266908.16</div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div>1962.76</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	3

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	34319.48	84619.00
(ii) Unitemized	59698.00	246166.08
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	94017.48	330785.08
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	94017.48	330785.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	582.77	1071.77
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	443.35	2333.85
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	95043.60	334190.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	95043.60	334190.70

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	81452.39	315548.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	81452.39	315548.50
22. Transfers to Affiliated/Other Party Committees.....	170.00	390.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5.00	2165.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	5.00	2165.75
29. Other Disbursements (Including Non-Federal Donations).....	960.97	4573.55
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	82588.36	322677.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	82588.36	322677.80

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	94017.48	330785.08
34. Total Contribution Refunds (from Line 28(d))	5.00	2165.75
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	94012.48	328619.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	81452.39	315548.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	582.77	1071.77
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	80869.62	314476.73

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Aitken, David, , Mr.,

Mailing Address 1240 N OGDEN ST APT 4

City
DENVERState
COZip Code
80218-1930FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198111

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Erik, Wayne, ,

Mailing Address 20440 SW DELINE ST

City
AlohaState
ORZip Code
97007-2879FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Springs LivingOccupation (for Individual)
Chef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2023

Transaction ID : SA11AI.198133

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bailey, Alvin, C., ,

Mailing Address PO BOX 611

City
AUBURNState
ALZip Code
36831-0611FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2023

Transaction ID : SA11AI.198192

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

437.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bamler, William, , Mr.,

Mailing Address 2381 Port Williams Dr

City
Stow

State
OH

Zip Code
44224-1981

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.198212

Amount of Each Receipt this Period

75.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Baranski, Janine, , ,

Mailing Address 15585 Huntcliff Dr

City

MacOmb

State

MI

Zip Code

48044-3851

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Conversa Solutions LLC

Occupation (for Individual)

Software Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198217

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barrick, David, S, ,

Mailing Address PO BOX 583

City

HOLMES

State

NY

Zip Code

12531-0583

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2023

Transaction ID : SA11AI.198235

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

376.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 111

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barricklow, Wayne, J., ,

Mailing Address 3043 SE Banyan St

City
StuartState
FLZip Code
34997-7807FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CTS, LLCOccupation (for Individual)
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198236

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Beck, Ralph, Ernest, Mr,

Mailing Address PO BOX 24

City

BARNES CITY

State

IA

Zip Code

50027-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2023

Transaction ID : SA11AI.198266

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benson, Harold, Scott, Mr.,

Mailing Address 609 PARNEL RD

City

OLD HICKORY

State

TN

Zip Code

37138-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
n/a

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 06 / 2023

Transaction ID : SA11AI.198294

Amount of Each Receipt this Period

60.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

435.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Benson, Ronald, R, Mr, Sr

Mailing Address PO BOX 16456

City
CHAPEL HILLState
NCZip Code
27516-6456FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Chapel Hill High N C Soccer CoachOccupation (for Individual)
Soccer coach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.198295

Amount of Each Receipt this Period

206.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blake, Clay, Austin, Mr.,

Mailing Address 8842 HIGHWAY Z

City
FORTUNAState
MOZip Code
65034-2011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Koechner ManufacturingOccupation (for Individual)
Head of Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198341

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Boss, Jessica, , ,

Mailing Address 703 E Howell Ave

City
AlexandriaState
VAZip Code
22301-3088FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USAFOccupation (for Individual)
Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.198375

Amount of Each Receipt this Period

75.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

406.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bost, Jeanie, , Mrs.,

Mailing Address 208 BYRON RD

City
GERRARDSTOWN

State
WV

Zip Code
25420-4595

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2023

Transaction ID : SA11AI.198376

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Braaten, Tyler, , ,

Mailing Address 378 MAGNOLIA AVE

City
LEMOORE

State
CA

Zip Code
93245-2841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Keystone Freight

Occupation (for Individual)
Truck Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.198403

Amount of Each Receipt this Period

52.10

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bray, Neil, , ,

Mailing Address 316 CALIFORNIA AVE # 819

City
RENO

State
NV

Zip Code
89509-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2023

Transaction ID : SA11AI.198418

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

302.10

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Brown, Robert, Clyde, ,

Mailing Address 1190 S BARDEAUX AVE

City
YumaState
AZZip Code
85364-4134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
HCP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198449

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Browne, Harvey, M, , Jr

Mailing Address 15426 VILLAGE WOODS DR

City

EDEN PRAIRIE

State
MNZip Code
55347-1437FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.198455

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buffington, Brian, , ,

Mailing Address 8212 Ville Ct NE

City

Albuquerque

State
NMZip Code
87113-2806FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Public Service Company of New MexicoOccupation (for Individual)
Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.198472

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

457.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Burkholder, James, D, Dr.,

Mailing Address 221 WINSTON AVE NE

City
NORTH CANTON

State
OH

Zip Code
44720-2657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2023

Transaction ID : SA11AI.198493

Amount of Each Receipt this Period

392.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burris, Michael, Ray, ,

Mailing Address 115 PARKRIDGE CIR

City
SEGUIN

State
TX

Zip Code
78155-7158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2023

Transaction ID : SA11AI.198499

Amount of Each Receipt this Period

42.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Calhoun, Kristin, L, ,

Mailing Address 220959 BELL ST

City
HATLEY

State
WI

Zip Code
54440-6000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Sex worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2023

Transaction ID : SA11AI.198522

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

518.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Callahan, John, , III

Mailing Address 10 DENNY ST
APT 1L

City
WORCESTER

State
MA

Zip Code
01609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lyft

Occupation (for Individual)

Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2023

Transaction ID : SA11AI.198524

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Campbell, Thorne, Templeton, Mr,

Mailing Address 2615 A AND M CIR

City

San Angelo

State

TX

Zip Code

76904-5824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.30

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198538

Amount of Each Receipt this Period

43.26

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Carney, William, J, Professor,

Mailing Address 1221 FAIRVIEW RD NE

City

Atlanta

State

GA

Zip Code

30306-4661

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Law Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2023

Transaction ID : SA11AI.198560

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

418.26

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carpenter, Brad, , ,

Mailing Address 571 Secretariat Ct

City
RenoState
NVZip Code
89521-6255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Urology NevadaOccupation (for Individual)
IT Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198562

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cavin, Marc, Joseph, Mr.,Mailing Address 1901 N GRANT ST
APT 612City
DENVERState
COZip Code
80203-1569FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kellogg CompanyOccupation (for Individual)
Planning Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198591

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cenkus, Mark, A, Mr,

Mailing Address 6810 CHESSLEY CHASE DR

City
SUGAR LANDState
TXZip Code
77479-5951FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198597

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Joshua, , Mr,

Mailing Address 3734 VIA TORTOLA

City
RIVERSIDE

State
CA

Zip Code
92503-4563

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Trane

Occupation (for Individual)

Service Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198636

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Claytor, Christopher, John, ,

Mailing Address 8717 MANDEVILLA DR

City
PLANO

State
TX

Zip Code
75024-7292

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

T-Mobile

Occupation (for Individual)

IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198647

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coalson, Martin, Hasty, Mr,

Mailing Address 20588 CHANSON WAY

City
RENO

State
NV

Zip Code
89511-9293

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.198660

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Corriere, Shane, A., Mr.,

Mailing Address 1736 BARON DR

City
YORKState
PAZip Code
17408-2245FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CA Weber Agency

Occupation (for Individual)

Insurance Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198712

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dallmann, De, , ,

Mailing Address 15707 S RIVER RD

City

Plainfield

State

IL

Zip Code

60544-8119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

US DOE

Occupation (for Individual)

Supervisory Physical Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198780

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dekany, Sue, , Mrs.,

Mailing Address 3440 FAIR OAKS AVE

City

ALTADENA

State

CA

Zip Code

91001-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2023

Transaction ID : SA11AI.198834

Amount of Each Receipt this Period

240.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

468.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. de Mello, Michael, , Mr,

Mailing Address 20154 SUNSET LANDING AVE

City
GROVELAND

State
FL

Zip Code
34736-8208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Private equity consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.198810

Amount of Each Receipt this Period

210.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Depoy, Jeffrey, Scott, ,

Mailing Address 33601 CRYSTAL SPRINGS RD

City

BERRIEN CTR

State

MI

Zip Code

49047-8701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JMC Industries

Occupation (for Individual)

Machinist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198846

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DiLella, Daniel, , Mr., Jr

Mailing Address 3843 WEST CHESTER PIKE

City

NEWTOWN SQ

State

PA

Zip Code

19073-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Equus Capital Partners, Ltd.

Occupation (for Individual)

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 26 / 2023

Transaction ID : SA11AI.198865

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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460.00

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Doty, Jeffery, M, Mr,

Mailing Address 6 NORTH POINTE APT 1N

City
HALFMOONState
NYZip Code
12065-4333FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.198884

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dugger, Nicholas, , ,

Mailing Address 4117 PARKRIDGE DR

City
Saint PaulState
MNZip Code
55110-7600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Sr Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198904

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dunn, Joshua, Benjamin, ,

Mailing Address 9529 ORION CT

City
BURKEState
VAZip Code
22015-3242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alexandria Auctions

Occupation (for Individual)

Cataloger

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198908

Amount of Each Receipt this Period

600.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

978.75

SCHEDULE A (FEC Form 3X)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Durham, Steven, Thomas, Mr.,

Mailing Address 2555 LEIGH AVE

City
LAS VEGASState
NVZip Code
89120-1831FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2023

Transaction ID : SA11AI.198915

Amount of Each Receipt this Period

126.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Eby, Heather, M, ,

Mailing Address 7448 SW 60TH ST

City
AUGUSTAState
KSZip Code
67010-7823FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.198931

Amount of Each Receipt this Period

438.36

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Elliott, Ken, Rollin, Mr.,

Mailing Address 852 WHITCOMB WOODS DR

City
TroyState
MOZip Code
63379-3004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Flooring Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.198953

Amount of Each Receipt this Period

103.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

667.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fox, Drake, , Mr.,

Mailing Address 7602 Owl Roost Ct

City
Wilmington

State
NC

Zip Code
28411-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Spirit Airlines

Occupation (for Individual)

Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

04 / 01 / 2023

Transaction ID : SA11AI.199085

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Franklin, David, Donald, Mr.,

Mailing Address 6901 Hubbard St

City
Garden City

State
MI

Zip Code
48135-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Kroger

Occupation (for Individual)

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1545.00

Date of Receipt

04 / 11 / 2023

Transaction ID : SA11AI.199092

Amount of Each Receipt this Period

1545.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Garcia, Roman, F, ,

Mailing Address 6848 E BROWNSTONE PL

City
TUCSON

State
AZ

Zip Code
85750-2073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PHS

Occupation (for Individual)

IT Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

515.00

Date of Receipt

04 / 20 / 2023

Transaction ID : SA11AI.199145

Amount of Each Receipt this Period

515.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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2188.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gearhart, Scott, Edward, ,

Mailing Address 8325 DUBBS DR

City
SEVERN

State
MD

Zip Code
21144-3320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NA

Occupation (for Individual)
Na

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1595.47

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2023

Transaction ID : SA11Al.199178

Amount of Each Receipt this Period

10.30

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gearhart, Scott, Edward, ,

Mailing Address 8325 DUBBS DR

City
SEVERN

State
MD

Zip Code
21144-3320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NA

Occupation (for Individual)
Na

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1737.47

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11Al.199179

Amount of Each Receipt this Period

142.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gearhart, Scott, Edward, ,

Mailing Address 8325 DUBBS DR

City
SEVERN

State
MD

Zip Code
21144-3320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NA

Occupation (for Individual)
Na

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1781.23

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11Al.199180

Amount of Each Receipt this Period

43.76

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

196.06

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gilbert, Brian, T., Mr.,

Mailing Address 609 BARTRAM CT

City
FLOURTOWNState
PAZip Code
19031-1536FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2023

Transaction ID : SA11AI.199195

Amount of Each Receipt this Period

105.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gitzendanner, Andrew, , ,

Mailing Address 5565 E CUSTER PL

City
DENVERState
COZip Code
80246-1440FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Boulder Imaging

Occupation (for Individual)

Sr Business Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.08

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199204

Amount of Each Receipt this Period

86.52

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Glass, W Bruce, , Mr.,

Mailing Address 84 BAKEWELL CT

City
CRANSTONState
RIZip Code
02921-2411FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Senior Care Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199207

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

243.02

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Godfrey, Marcus, Scott, Mr.,

Mailing Address 10448 PEKOLEE DR

City
GRASS VALLEY

State
CA

Zip Code
95949-9260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sutter Roseville Medical Center

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.08

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199212

Amount of Each Receipt this Period

86.52

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Graft, Thomas, Osborn, ,

Mailing Address 3515 CASTLE HILL DR

City
WOODBIDGE

State
VA

Zip Code
22193-5326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Golden Key Group

Occupation (for Individual)
Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 07 / 2023

Transaction ID : SA11AI.199252

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Green, Jake, , Mr.,

Mailing Address 4514 CHAMBLEE DUNWOODY RD

City
ATLANTA

State
GA

Zip Code
30338-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Filmmaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199273

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

711.52

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Greenlee, Jonathan, N., ,

Mailing Address 7100 Oak Street, Arvada, CO

City

Arvada, CO

State

CO

Zip Code

80004-1460

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Golden Mountain Montessori

Occupation (for Individual)

Business Manager

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199277

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haggerty, James, P., ,

Mailing Address 1128 VIA GRANDE

City

CATHEDRAL CTY

State

CA

Zip Code

92234-4300

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Real Estate

Occupation (for Individual)

Agent

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199323

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hagopian, Todd, Christopher, ,

Mailing Address 11290 S 72ND EAST CT

City

BIXBY

State

OK

Zip Code

74008-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cash Flow Acquisitions

Occupation (for Individual)

President

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199325

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

303.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hagopian, Todd, Christopher, ,

Mailing Address 11290 S 72ND EAST CT

City
BIXBYState
OKZip Code
74008-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cash Flow Acquisitions

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2023

Transaction ID : SA11AI.199326

Amount of Each Receipt this Period

120.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hagopian, Todd, Christopher, ,

Mailing Address 11290 S 72ND EAST CT

City
BIXBYState
OKZip Code
74008-2344FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cash Flow Acquisitions

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.76

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.199327

Amount of Each Receipt this Period

43.76

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Haseloff, Robert, Henry, , Jr

Mailing Address 4320 LAURIE MICHELLE RD

City
SAN ANTONIOState
TXZip Code
78261-1821FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USAA

Occupation (for Individual)

Contract negotiator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199393

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

413.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 111

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haseloff, Robert, Henry, , Jr

Mailing Address 4320 LAURIE MICHELLE RD

City
SAN ANTONIOState
TXZip Code
78261-1821FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USAAOccupation (for Individual)
Contract negotiator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1043.76

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.199394

Amount of Each Receipt this Period

43.76

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Healy, William, C., Mr.,Mailing Address 10002 AURORA AVE N # 5551
5551City
SEATTLEState
WAZip Code
98133-9347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LMRCOccupation (for Individual)
therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199428

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hendrix, Joseph, , ,

Mailing Address 6019 Taylorsville Rd

City
DaytonState
OHZip Code
45424-2949FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northrop GrummanOccupation (for Individual)
software engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.70

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2023

Transaction ID : SA11AI.199454

Amount of Each Receipt this Period

118.70

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

287.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hertel, Jeremy, , ,

Mailing Address 706 Frame Rd

City
NewburghState
INZip Code
47630-1607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Audubon MetalsOccupation (for Individual)
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199471

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hildebrand, Amara, Lynne, Ms.,

Mailing Address 2440 S CHASE LN

City
LakewoodState
COZip Code
80227-3903FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Eugene LynneOccupation (for Individual)
Civil Engineer and Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199477

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hill, Darren, , ,

Mailing Address 4085 MOHAWK DR

City
LARKSPURState
COZip Code
80118-8901FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199478

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1676.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Himes, Jason, Francis, ,

Mailing Address 909 N FORK TRL

City
GEORGETOWN

State
TX

Zip Code
78633-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Jacobs

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 04 / 2023

Transaction ID : SA11AI.199485

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hinkledire, Janice, , ,

Mailing Address 10849 LUCKS RD

City
BUMPASS

State
VA

Zip Code
23024-9675

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Magellan Health

Occupation (for Individual)
Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2023

Transaction ID : SA11AI.199486

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoiles, Douglas, , Mr.,

Mailing Address 10047 E ACAMPO RD

City
ACAMPO

State
CA

Zip Code
95220-9480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199504

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

301.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 111

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hoiles, Douglas, , Mr.,

Mailing Address 10047 E ACAMPO RD

City
ACAMPOState
CAZip Code
95220-9480FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.199505

Amount of Each Receipt this Period

120.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoiles, Pamela, J., Mrs.,

Mailing Address 37 DAVENPORT AVE APT 1

City
GREENWICHState
CTZip Code
06830-7176FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199506

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hopkins, William, Robert, Mr, Jr

Mailing Address 2609 W SOUTHERN AVE LOT 158

City
TEMPEState
AZZip Code
85282-4219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alaska Airlines

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199525

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

296.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 111

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. House, V, Dwight, Mr,

Mailing Address 15 TALL PINES RD

City
HENDERSONVILLEState
NCZip Code
28739-8136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.199534

Amount of Each Receipt this Period

210.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hudson, Will, Basil, Mr, II

Mailing Address 320 BELLO DR

City
LeanderState
TXZip Code
78641-7996FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Dell

Occupation (for Individual)

IT Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2023

Transaction ID : SA11AI.199558

Amount of Each Receipt this Period

515.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jackson, Lee, S., Dr., PhD

Mailing Address 14 DORAL DR

City
SHALIMARState
FLZip Code
32579-1612FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199605

Amount of Each Receipt this Period

52.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

777.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Jacobson, Peter, E, ,

Mailing Address 200 E END AVE
APT 12H

City
NEW YORK

State
NY

Zip Code
10128-7891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Capacity/Performance Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2023

Transaction ID : SA11AI.199610

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Kurt, , ,

Mailing Address 10267 BENTWOOD LN

City

HGHLNDS RANCH

State

CO

Zip Code

80126-7871

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

New World Allstar, LLC

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199645

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Matthew, , ,

Mailing Address 908 New Bedford Dr

City

Deland

State

FL

Zip Code

32724-2952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Marketing General Inc

Occupation (for Individual)

Online Marketing Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199647

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

426.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Karpicke, John, A, Dr,

Mailing Address 1152 IVY LN

City
IndianapolisState
INZip Code
46220-2657FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.199690

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kiernan, Brian, G., Mr.,

Mailing Address 435 Carpenters Cove Ln

City
DowningtownState
PAZip Code
19335-4541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199737

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Klein, Joseph, F, Mr, Jr

Mailing Address 947 CHESTER PIKE

City
SHARON HILLState
PAZip Code
19079-1432FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2023

Transaction ID : SA11AI.199758

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.25

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 111

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kleiner, John, Murray Allen, ,

Mailing Address 46 GREENFIELD DR

City
MORAGAState
CAZip Code
94556-1333FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
visual communicator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2023

Transaction ID : SA11AI.199760

Amount of Each Receipt this Period

85.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kula, Christopher, James, Mr.,

Mailing Address 863 VERMONT ST

City
OAKLANDState
CAZip Code
94610-2120FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199812

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LaClair, James, , ,

Mailing Address 10180 FENCEPOST LN

City
Traverse CityState
MIZip Code
49685-7470FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NNFOccupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199825

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

294.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LaClair, James, , ,

Mailing Address 10180 FENCEPOST LN

City

Traverse City

State

MI

Zip Code

49685-7470

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NNF

Occupation (for Individual)

Owner

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

536.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2023

Transaction ID : SA11AI.199826

Amount of Each Receipt this Period

200.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LaFountain, Chris, , ,

Mailing Address 111 VILLA RD

City

JESUP

State

GA

Zip Code

31546-4921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Federal Bureau of Prisons

Occupation (for Individual)

Powerhouse Forman

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.199830

Amount of Each Receipt this Period

210.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lamb, George, Peter, Mr., III

Mailing Address 16 MARTHA'S LN

City

SANTA ROSA BEACH

State

FL

Zip Code

32459-4172

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Applied Construction Technology

Occupation (for Individual)

Commerical Construction

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199834

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►

510.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 111

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laughlin, Dennis, Byron, Mr.,

Mailing Address 989 W 4th North St

City
Green RiverState
WYZip Code
82935-4039FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 04 / 2023

Transaction ID : SA11AI.199864

Amount of Each Receipt this Period

515.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Leatherbury, Jennifer, Diane, ,

Mailing Address 126 ARCHER RD

City
NEWPORT NEWSState
VAZip Code
23606-1102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Coastal Medical and Psychiatric Servc

Occupation (for Individual)

Physician Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199877

Amount of Each Receipt this Period

75.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Levin, Andrew, C., ,

Mailing Address 101 EMERSON AVE

City
FLORAL PARKState
NYZip Code
11001-1219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2023

Transaction ID : SA11AI.199923

Amount of Each Receipt this Period

60.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Levin, Andrew, C., ,

Mailing Address 101 EMERSON AVE

City
FLORAL PARK

State
NY

Zip Code
11001-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.199924

Amount of Each Receipt this Period

43.76

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Libkind, Ark, Isaac, ,

Mailing Address 8700 FRONTENAC ST

City
Philadelphia

State
PA

Zip Code
19152-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Prime Home Care, Inc.

Occupation (for Individual)

Board Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.199934

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loomis, Richard, W, ,

Mailing Address 235 AMES RD

City
HAMPDEN

State
MA

Zip Code
01036-9110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Loomis and Loomis Inc.

Occupation (for Individual)

Structural Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.199974

Amount of Each Receipt this Period

206.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

374.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Macias, Matthew, , ,

Mailing Address 616 N 7TH ST
APT 737

City
SAINT LOUIS

State
MO

Zip Code
63101-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hogan Transportation

Occupation (for Individual)

OTR Semi-Truck Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200012

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Maggard, Dustin, , ,

Mailing Address 800 HICKORY AVE

City

BROWNS MILLS

State

NJ

Zip Code

08015-2925

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PSE&G

Occupation (for Individual)

Diesel Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2023

Transaction ID : SA11AI.200030

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marsh, JAMES, Pitts, Mr,

Mailing Address 1030 SHADOW ARBOR CIR

City

CHARLESTON

State

SC

Zip Code

29414-6647

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Gildan

Occupation (for Individual)

ESSENTIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 27 / 2023

Transaction ID : SA11AI.200073

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

426.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Marshall, Glen, Edward, Mr.,

Mailing Address 949 COLUMBUS DR

City
CAPITOLAState
CAZip Code
95010-2309FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American AirlinesOccupation (for Individual)
Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200075

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathers, Thomas, P., Mr.,

Mailing Address 5626 Ruantan Street

City
Berwyn HeightsState
MDZip Code
20740-4312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NCBFAA Inc.Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200100

Amount of Each Receipt this Period

61.80

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mazzetti, Matthew, , ,

Mailing Address 2258 BURGUNDY DR

City
MACUNGIEState
PAZip Code
18062-8771FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wendy'sOccupation (for Individual)
Crew

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200116

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶

238.30

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 111

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McGillen, Steven, Sean, ,

Mailing Address 2112 VANDERBILT LN UNIT C

City

Redondo Beach

State

CA

Zip Code

90278-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Sales

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200152

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mellas, Darren, , ,

Mailing Address 5673 W EMMELINE DR

City

HERRIMAN

State

UT

Zip Code

84096-1892

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Elev8 Office

Occupation (for Individual)

Office Furnishing

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

333.33

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2023

Transaction ID : SA11AI.200192

Amount of Each Receipt this Period

333.33

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Merriman, Allen, Richard, ,

Mailing Address 40 GOVERNOR WENTWORTH RD

City

AMHERST

State

NH

Zip Code

03031-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AlixPartners

Occupation (for Individual)

Management Consultant

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

247.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2023

Transaction ID : SA11AI.200201

Amount of Each Receipt this Period

61.80

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►

479.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Lukas, , Mr.,

Mailing Address 306 STATE AVE SE
APT 205

City
WARROAD

State
MN

Zip Code
56763-2654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

None

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.69

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 21 / 2023

Transaction ID : SA11AI.200221

Amount of Each Receipt this Period

420.69

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. M Lesko, John, , Mr.,

Mailing Address 7740 W SUNLARK WAY

City
TUCSON

State
AZ

Zip Code
85743-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2023

Transaction ID : SA11AI.200004

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Moberly, Sean, , ,

Mailing Address 1623 District Dr

City
Morgantown

State
WV

Zip Code
26505-3835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Insitu

Occupation (for Individual)
Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 07 / 2023

Transaction ID : SA11AI.200250

Amount of Each Receipt this Period

69.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

747.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morton, Chuck, , Mr.,

Mailing Address 3481 VININGS NORTH TRL SE

City
SMYRNA

State
GA

Zip Code
30080-4581

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.200303

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Moulton, Charles, , Dr.,

Mailing Address 1036 HEMLOCK DR

City
BLUE BELL

State
PA

Zip Code
19422-1572

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Twitch

Occupation (for Individual)

streamer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200306

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Munteer, John, Carlyle, ,

Mailing Address 211 S OCEAN DR APT 1004

City
HOLLYWOOD

State
FL

Zip Code
33019-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200309

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

251.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neis, Michael, P, ,

Mailing Address 17 SOUTHERN PINE TRL

City

Ormond Beach

State

FL

Zip Code

32174-5988

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NASCAR

Occupation (for Individual)

Regional Director of Sales

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.200340

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nevins, Michael, Olen, ,

Mailing Address 4880 BROOKLYN RD

City

JACKSON

State

MI

Zip Code

49201-7814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200357

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Newlin, David, , ,

Mailing Address 5882 BREWER RD

City

MASON

State

OH

Zip Code

45040-9239

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

West Chester Twp

Occupation (for Individual)

Firefighter

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

247.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200361

Amount of Each Receipt this Period

61.80

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

686.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Newsome, Michael, Richard, Mr.,

Mailing Address 579 ZELLS MILL RD

City
NEWPORTState
VAZip Code
24128-4121FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Caveman Technology Inc.Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2023

Transaction ID : SA11AI.200364

Amount of Each Receipt this Period

25.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Newton, Russell, C, Mr,Mailing Address 86 PINECREST DR
UNIT 4ECity
ESSEX JCTState
VTZip Code
05452-4402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.200367

Amount of Each Receipt this Period

525.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Niece, Robert, Christopher, ,

Mailing Address 212 SHAKERSTONE DR

City
FAYETTEVILLEState
NCZip Code
28311-6301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UspsOccupation (for Individual)
Electronic Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

541.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2023

Transaction ID : SA11AI.200371

Amount of Each Receipt this Period

438.36

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

989.11

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Connor, Sean, , ,

Mailing Address 8577 HAWKSBRIDGE CT

City
MACEDONIAState
OHZip Code
44056-1754FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SwagelokOccupation (for Individual)
System Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2023

Transaction ID : SA11AI.200400

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'Toole, Sean, T., ,

Mailing Address 3425 Gladstone Blvd

City
Kansas CityState
MOZip Code
64123-1112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U. Inc.Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200435

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ogle, William, Charles, ,

Mailing Address 43804 PARAMOUNT PL

City
CHANTILLYState
VAZip Code
20152-5709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Azure Summit TechnologyOccupation (for Individual)
Principal Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.53

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 11 / 2023

Transaction ID : SA11AI.200408

Amount of Each Receipt this Period

25.00

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Osborne, Steven, Ray, ,

Mailing Address 412 RIVER OAKS DR

City
LULINGState
LAZip Code
70070-2144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200429

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Palmer, Brady, , Mister,

Mailing Address 841 E DUSTY ROCK PL

City
SANDYState
UTZip Code
84094-5307FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Airmethods Corp.Occupation (for Individual)
Helicopter Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2023

Transaction ID : SA11AI.200453

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pelletier, Justin, M., Dr., PhD

Mailing Address 2 MISTY PINE RD

City
FairportState
NYZip Code
14450-2610FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Rochester Institute of TechnologyOccupation (for Individual)
Professor of Practice

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200504

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

337.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Perkins, Timothy, Joash, ,

Mailing Address PO BOX 13573

City
SALEMState
ORZip Code
97309-1573FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/aOccupation (for Individual)
Father

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200508

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Perkins, William, O, Mr, III

Mailing Address 5847 SAN FELIPE ST STE 4450

City
HOUSTONState
TXZip Code
77057-3232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4420.16

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.200509

Amount of Each Receipt this Period

4420.16

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pohler, Clinton, James, Mr.,Mailing Address 609 HI CIR N
UNIT ACity
HORSESHOE BAYState
TXZip Code
78657-5827FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Coupa SoftwareOccupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200560

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4670.16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 111
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Potter, Pamela, E, ,

Mailing Address 538 SPRING PLACE RD NE

City
WHITEState
GAZip Code
30184-2232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2023

Transaction ID : SA11AI.200579

Amount of Each Receipt this Period

300.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Raines, Alexander, Scott, ,

Mailing Address 670 DOWNEY GREEN ST APT 453

City
HamptonState
VAZip Code
23666-2283FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.08

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200623

Amount of Each Receipt this Period

86.52

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rich, Perry, L, Mr,

Mailing Address 7117 ALLISON WAY

City
KNOXVILLEState
TNZip Code
37918-0963FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

386.25

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.200692

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

515.27

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rogers, Brian, , ,

Mailing Address 3681 Dead Timber Rd

City
CaliforniaState
KYZip Code
41007-9270FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Geiler Co.Occupation (for Individual)
Plumber

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 06 / 2023

Transaction ID : SA11AI.200740

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Salvette, Emily, Hopp, Mrs.,

Mailing Address 2016 DEVONSHIRE RD

City
ANN ARBORState
MIZip Code
48104-4058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2023

Transaction ID : SA11AI.200814

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Satterfield, Tate, , Mr.,

Mailing Address 1138 ADDINGTON LN

City
WALESKAState
GAZip Code
30183-2682FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dynamic InstallationsOccupation (for Individual)
Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200830

Amount of Each Receipt this Period

51.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

401.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sauter, John, B, Mr., JrMailing Address 20A NORTHWEST BLVD PMB 345
Ste 345City
NASHUAState
NHZip Code
03063-4066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

computer programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2023

Transaction ID : SA11AI.200834

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schlegel, Kenneth, Lee, ,

Mailing Address 1169 LORD DUNMORE DR

City

VIRGINIA BEACH

State

VA

Zip Code

23464-5447

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200853

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schmidt, Daniel, E, ,

Mailing Address 78 N SHORE RD

City

PETERSBURG

State

NY

Zip Code

12138-6428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

267.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 21 / 2023

Transaction ID : SA11AI.200861

Amount of Each Receipt this Period

126.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

501.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schoeb, Trenton, Robert, Dr,

Mailing Address 239 ODUM CREST LN

City
HOOVERState
ALZip Code
35226-1093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Alabama At BirminghamOccupation (for Individual)
consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.200863

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schwaiger, Steven, Ralph, ,

Mailing Address 208 ROSETTA DR

City
YORKTOWNState
VAZip Code
23693-1918FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ParsonsOccupation (for Individual)
Senior Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.200888

Amount of Each Receipt this Period

94.50

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scott, Floyd, Earl, , Jr

Mailing Address PO BOX 84258

City
Baton RougeState
LAZip Code
70884-4258FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Our Lady of The LakeOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

257.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2023

Transaction ID : SA11AI.200899

Amount of Each Receipt this Period

257.50

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

452.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 111

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Seebeck, Michael, William John, Mr,

Mailing Address 347 PINE HILL CIR

City

UNION GROVE

State

AL

Zip Code

35175-9436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lockheed Martin

Occupation (for Individual)

Systems Engineer

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.200916

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sharp, Christopher, William, Mr,

Mailing Address 27281 SUN CITY BLVD

City

MENIFEE

State

CA

Zip Code

92586-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Teacher

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

243.04

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2023

Transaction ID : SA11AI.200943

Amount of Each Receipt this Period

60.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sharp, Christopher, William, Mr,

Mailing Address 27281 SUN CITY BLVD

City

MENIFEE

State

CA

Zip Code

92586-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Teacher

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

306.04

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.200944

Amount of Each Receipt this Period

63.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

248.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 111

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smith, Lloyd, Edward, Mr.,

Mailing Address 4706 N TROY ST

City
CHICAGO

State
IL

Zip Code
60625-4423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Land Speculator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.201032

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sorenson, William, George, ,

Mailing Address 4915 EAGLE CREEK BLVD

City
SHAKOPEE

State
MN

Zip Code
55379-8001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nevelex Corporation

Occupation (for Individual)
System Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201075

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sprung, Lowri, Lee, Ms.,

Mailing Address 2155 W Paseo Del Mar

City
San Pedro

State
CA

Zip Code
90732-4556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2023

Transaction ID : SA11AI.201101

Amount of Each Receipt this Period

600.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

825.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Step, Trevor, Theodore, ,

Mailing Address 9130 HURON RIVER DR

City
BRIGHTON

State
MI

Zip Code
48116-8846

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RF Events

Occupation (for Individual)

Event manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.46

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 21 / 2023

Transaction ID : SA11AI.201137

Amount of Each Receipt this Period

134.70

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stermer, John, J., Mr.,

Mailing Address 3161 N BDALE RD

City

BLOOMINGDALE

State

IN

Zip Code

47832-8011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 18 / 2023

Transaction ID : SA11AI.201143

Amount of Each Receipt this Period

515.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stevens, Shantell, , ,

Mailing Address 16402 W MAIN ST

City

LOUISVILLE

State

MS

Zip Code

39339-2646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Polo Custom Products

Occupation (for Individual)

Training Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2023

Transaction ID : SA11AI.201144

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

774.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stewart, Scott, Alan, Mr.,

Mailing Address 8401 E APPOMATTOX ST

City
TUCSONState
AZZip Code
85710-2922FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Control Vision, Inc.Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.80

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 12 / 2023

Transaction ID : SA11AI.201153

Amount of Each Receipt this Period

40.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. St John, James, Joseph, Mr,

Mailing Address 3421 W BONNER DR

City
NORFOLKState
VAZip Code
23513-4250FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Assured ConstructionOccupation (for Individual)
Carpenter/Contruccion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2023

Transaction ID : SA11AI.201104

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Strugatskiy, Ivan, , ,

Mailing Address 1081 PALMER AVE

City
LARCHMONTState
NYZip Code
10538-3316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IVS Adviaory LLCOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201183

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

318.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Strugatskiy, Ivan, , ,

Mailing Address 1081 PALMER AVE

City
LARCHMONTState
NYZip Code
10538-3316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IVS Adviaory LLCOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2023

Transaction ID : SA11AI.201184

Amount of Each Receipt this Period

63.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sugden, Ryan, , ,

Mailing Address 16422 NE 29TH ST

City
BELLEVUEState
WAZip Code
98008-2114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TbspOccupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201192

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sugden, Ryan, , ,

Mailing Address 16422 NE 29TH ST

City
BELLEVUEState
WAZip Code
98008-2114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TbspOccupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

628.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2023

Transaction ID : SA11AI.201193

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

316.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 111

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sweeney, Ryan, , ,

Mailing Address 9415 Carmel Dr

City
JohnstonState
IAZip Code
50131-2832FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hyperion Field ClubOccupation (for Individual)
Waiter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201213

Amount of Each Receipt this Period

42.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Swier, Schuyler, , ,Mailing Address 107 N BENTON DR
APT 107

City

SAUK RAPIDS

State
MNZip Code
56379-1486FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2023

Transaction ID : SA11AI.201215

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Swift, Jim, , Dr.,

Mailing Address 850 W Tellier Trl

City

Wickenburg

State
AZZip Code
85390-6247FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201216

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

251.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 111
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Test, Charles, Davol, Mr.,

Mailing Address 2710 2ND AVE S

City
MINNEAPOLISState
MNZip Code
55408-1710FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.201247

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thompson, Stewart, Alan, Dr., PhD

Mailing Address 27351 E EL MACERO DR

City
EL MACEROState
CAZip Code
95618-1004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201273

Amount of Each Receipt this Period

86.52

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Todd, Jeremy, Ryan, ,

Mailing Address 116 CARRIAGE PARK DR

City
ALEXANDRIAState
KYZip Code
41001-1079FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PNC BankOccupation (for Individual)
Assistant Branch Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201281

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

340.27

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tsatsos, Thea, , Ms,

Mailing Address 346 FRANKLIN AVE

City
RIVER FOREST

State
IL

Zip Code
60305-2118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Rush Oak Park Hospital

Occupation (for Individual)
Medical technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2023

Transaction ID : SA11AI.201331

Amount of Each Receipt this Period

1500.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Vogel, Christopher, , ,

Mailing Address 3845 McGrath Dr

City
Dublin

State
OH

Zip Code
43016-4173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NetJets Inc.

Occupation (for Individual)
pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201399

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Wappel, Eric, Dale, ,

Mailing Address 6790 S 375 W

City
North Judson

State
IN

Zip Code
46366-8818

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 27 / 2023

Transaction ID : SA11AI.201435

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1875.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 111

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wescott, Thomas, R., ,

Mailing Address 86-177 Moeha St

City
WaianaeState
HIZip Code
96792-4407FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Commercial Plumbing Inc.Occupation (for Individual)
Plumber

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201493

Amount of Each Receipt this Period

128.75

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Whiting, Rebecca, , ,

Mailing Address 9099 Walnut Rd SE

City
BemidjiState
MNZip Code
56601-9502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Agriculture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201525

Amount of Each Receipt this Period

84.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wicklund, Matthew, Paul, Dr.,

Mailing Address 5491 E Geddes Pl

City
CentennialState
COZip Code
80122-2560FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of ColoradoOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201531

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

312.75

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Windsor, Brett, Andrew, Dr.,

Mailing Address 21300 LANCASTER RUN UNIT 925
UNIT 925City
ESTEROState
FLZip Code
33928-6300FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NAIOMTOccupation (for Individual)
Physical Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201572

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Winzeler, Micah, , ,

Mailing Address 6345 LONG HWY

City

EATON RAPIDS

State

MI

Zip Code

48827-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2023

Transaction ID : SA11AI.201578

Amount of Each Receipt this Period

125.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wood, Kyle, H., ,

Mailing Address PO Box 582

City

Pocono Pines

State

PA

Zip Code

18350-0582

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Best Efforts Info RequestedOccupation (for Individual)
Best Efforts Info Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2023

Transaction ID : SA11AI.201591

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 111

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wray, Justin, , ,

Mailing Address 185 Jonathan Way N

City
Red Lion

State
PA

Zip Code
17356-9038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CoreBTS

Occupation (for Individual)
Cyber Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2023

Transaction ID : SA11AI.201600

Amount of Each Receipt this Period

180.25

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.25

34319.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 111

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cooley, J, Reed, Mr.,

Mailing Address 89 MORNING DEW RD

City
LAUREL

State
MS

Zip Code
39443-0600

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Best Efforts Info Requested

Occupation (for Individual)

Communications Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2023

Transaction ID : SA15.201769

Amount of Each Receipt this Period

582.77

☐ Memo Item

COBRA Payment from Former Employee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

582.77

582.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 111

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Grill, David, , ,

Mailing Address 2702 WILLOW BEND RD

City
CHAMPAIGNState
ILZip Code
61822-7592FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Regency Management ServiceOccupation (for Individual)
business exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	01	2023

Transaction ID : SA17.199288

Amount of Each Receipt this Period

100.00

☐ Memo Item

Headquarters Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harlos, Caryn Ann, , ,

Mailing Address 874 S LINDSEY ST

City
CASTLE ROCKState
COZip Code
80104-8917FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Law Offices of Randy CorporonOccupation (for Individual)
paralegal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	11	2023

Transaction ID : SA17.199369

Amount of Each Receipt this Period

50.00

☐ Memo Item

Legal Account - Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pantke, Donovan, , ,

Mailing Address 3304 Hunter Cove Dr

City
ArlingtonState
TXZip Code
76001-6638FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
InforOccupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	09	2023

Transaction ID : SA17.200462

Amount of Each Receipt this Period

51.50

☐ Memo Item

Legal Account - Contribution

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

201.50

201.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Aiken, David, , ,

Mailing Address 1240 N Ogden St #4

City
DenverState
COZip Code
80218-0000Purpose of Disbursement
Civi-CRM & Campaign Support

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	3

FEC Identification Number

C

Transaction ID : SB21B.20177

Amount of Each Disbursement this Period

1230.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Aitken, David, , Mr.,

Mailing Address 1240 N OGDEN ST APT 4

City
DENVERState
COZip Code
80218-1930Purpose of Disbursement
Civi-CRM & Campaign Support

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	3

FEC Identification Number

C

Transaction ID : SB21B.20167

Amount of Each Disbursement this Period

1222.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon.com

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	3

FEC Identification Number

C

Transaction ID : SB21B.20167

Amount of Each Disbursement this Period

120.14

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2452.50

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201679

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Amazon Cloud Services

Mailing Address 1200 12th Avenue South #1200

City
SeattleState
WAZip Code
98144-2734Purpose of Disbursement
Cloud Web Server

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20167

Amount of Each Disbursement this Period

98.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 536216

City
AtlantaState
GAZip Code
30353-6216Purpose of Disbursement
Wireless Wi-Fi Router

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20168

Amount of Each Disbursement this Period

68.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BB&T Truist Bank

Mailing Address 1717 King St

City
AlexandriaState
VAZip Code
22314-0000Purpose of Disbursement
Bank Service Charge

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20167

Amount of Each Disbursement this Period

105.50

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

105.50

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201678

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201680

See BB&T Truist Visa 04-30-23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. BB&T Truist Visa

Mailing Address PO BOX 580340

City
CharlotteState
NCZip Code
28258-0340Purpose of Disbursement
Credit Card Payment See Memo

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20167

Amount of Each Disbursement this Period

5936.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BitTitan, Inc.Mailing Address 10801 N Mopac Expressway
Building 1, Suite 100City
AustinState
TXZip Code
78759-0000Purpose of Disbursement
HSuite to MS Team Migration Software

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20168

Amount of Each Disbursement this Period

735.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Buchkovich, Andrew, L., ,

Mailing Address 12594 W Dakota Ave Apt 201

City
LakewoodState
COZip Code
80228-2535Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

792.38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6728.72

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201682

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Buchkovich, Andrew, L., ,

Mailing Address 12594 W Dakota Ave Apt 201

City
LakewoodState
COZip Code
80228-2535Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 26 / 2023

FEC Identification Number

C

Transaction ID : SB21B.20170

Amount of Each Disbursement this Period

792.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Butts, Matthew, , Mr.,

Mailing Address 1848 El Rey St

City
RosamondState
CAZip Code
93560-7559Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 12 / 2023

FEC Identification Number

C

Transaction ID : SB21B.20170

Amount of Each Disbursement this Period

1084.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Butts, Matthew, , Mr.,

Mailing Address 1848 El Rey St

City
RosamondState
CAZip Code
93560-7559Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 26 / 2023

FEC Identification Number

C

Transaction ID : SB21B.20170

Amount of Each Disbursement this Period

1084.68

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2961.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. CareFirst BlueChoice, Inc.

Mailing Address PO Box 79749

City
BaltimoreState
MDZip Code
21279-0749Purpose of Disbursement
Employee health and Dental

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

2218.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CIMA Companies, Inc.

Mailing Address 2750 Killarney Drive, Suite 202

City
WoodbridgeState
VAZip Code
22192-4124Purpose of Disbursement
Insurance

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	0			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

5881.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Colorado Department of Revenue

Mailing Address Ref Form DR 1094

City
DenverState
COZip Code
80261-0008Purpose of Disbursement
CO - Withholding

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

25.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

8124.21

TOTAL This Period (last page this line number only).....▶

X	21b		22		23		26		27
	28a		28b		28c		29		30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

M M / D D / Y Y Y Y
04 26 2023

State: District:

 Memo Item

04 / 19 / 2023

State: District:

X Memo Item



State: District:

X Memo Item

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201685

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201686

See BB&T Truist Visa 04-30-23

X	21b		22		23		26		27
	28a		28b		28c		29		30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

M M / D D / Y Y Y Y

04 02 2023

6.00

X Memo Item

04 / 01 / 2023

2000.00

Memo Item

99.50

X Memo Item

Fruit	Number of People
Apple	1500
Banana	1000
Orange	1200
Grapes	800

[illegible]

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201687

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201688

See BB&T Truist Visa 04-30-23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Extra Space Storage

Mailing Address 8000 Southpark Way

City
LittletonState
COZip Code
80120-0000Purpose of Disbursement
Storage

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20168

Amount of Each Disbursement this Period

298.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Unemployment

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

3.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Federal Withholding

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

2364.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2367.23

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201689

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Company

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	3

FEC Identification Number

C

Transaction ID : SB21B.20171

Amount of Each Disbursement this Period

243.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	3

FEC Identification Number

C

Transaction ID : SB21B.20172

Amount of Each Disbursement this Period

243.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	3

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

1040.05

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1526.53

TOTAL This Period (last page this line number only).....▶

X	21b		22		23		26		27
	28a		28b		28c		29		30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

C

1040.05

Memo Item

MM / DD / YYYY

C

Category/
Type

2367.00

FEC Identification Number

Category/
Type

243.62

 Memo Item

3650.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Medicare Employee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	2	3		

FEC Identification Number

C**Transaction ID : SB21B.20172**

Amount of Each Disbursement this Period

243.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	2	3		

FEC Identification Number

C**Transaction ID : SB21B.20172**

Amount of Each Disbursement this Period

1041.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City
St. LouisState
MOZip Code
63197-0030Purpose of Disbursement
Social Security Employee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	2	3		

FEC Identification Number

C**Transaction ID : SB21B.20172**

Amount of Each Disbursement this Period

1041.69

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2327.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. FP Mailing Solutions

Mailing Address PO Box 157

City
Bedford ParkState
ILZip Code
60499-0157Purpose of Disbursement
Postage & Meter Resets

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20172

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fresh IP PLC

Mailing Address 10044 Bee Apple Plc

City
MechanicsvilleState
VAZip Code
23116-0000Purpose of Disbursement
Legal Retainer

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GoDaddy.com, Inc.

Mailing Address 14455 N Hayden Rd # 226

City
ScottsdaleState
AZZip Code
85260-6993Purpose of Disbursement
Domain Renewals & Transfers

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20165

Amount of Each Disbursement this Period

122.85

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10020.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201690

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Google, Inc.

Mailing Address 1600 Amphitheatre Prky

City
Mt. ViewState
CAZip Code
94043-1351Purpose of Disbursement
GSuite Hosting Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20169

Amount of Each Disbursement this Period

1131.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Hall, Oliver, , ,

Mailing Address 1835 16th St NW #5

City
WashingtonState
DCZip Code
20009-0000Purpose of Disbursement
Legal Retainer

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HeroThemes

Mailing Address PO Box 7449

City
BellvueState
WAZip Code
98008-7449Purpose of Disbursement
Plug In Annual Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20165

Amount of Each Disbursement this Period

129.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4	5	0	0	.	0	0
---	---	---	---	---	---	---

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201691

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201692

See BB&T Truist Visa 04-30-23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hreha, Andrew, Michael, Mr,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2023

Mailing Address 1814 ACHESON AVE
PO BOX 284City
NORTH APOLLOState
PAZip Code
15673Purpose of Disbursement
Employee Net Pay

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.20173**

Amount of Each Disbursement this Period

1205.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hreha, Andrew, Michael, Mr,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2023

Mailing Address 1814 ACHESON AVE
PO BOX 284City
NORTH APOLLOState
PAZip Code
15673Purpose of Disbursement
Employee Net Pay

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.20173**

Amount of Each Disbursement this Period

1224.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hudson, Matthew, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2023

Mailing Address 120 ASH ST

City
GARDNERState
MAZip Code
01440-2130Purpose of Disbursement
Graphic Design Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.20173**

Amount of Each Disbursement this Period

1800.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4229.97

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Hudson, Matthew, , ,

Mailing Address 120 ASH ST

City
GARDNERState
MAZip Code
01440-2130Purpose of Disbursement
Graphic Design Services

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Huston, Elaine, , ,

Mailing Address 1115 Town Creek Dr Unit 455

City
AustinState
TXZip Code
78741-1517Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

4284.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Huston, Elaine, , ,

Mailing Address 1115 Town Creek Dr Unit 455

City
AustinState
TXZip Code
78741-1517Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

4284.89

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

10369.77

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Johnston, Robert, S., Mr., III

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		12		2023

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633

FEC Identification Number

C

Transaction ID : SB21B.20177

Amount of Each Disbursement this Period

324.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Kraus, Robert, Steven, ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		12		2023

Mailing Address 1717 N BAYSHORE DR APT 1636
Apt 1636City
MIAMIState
FLZip Code
33132-1153

FEC Identification Number

C

Transaction ID : SB21B.20173

Amount of Each Disbursement this Period

2019.30

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Kraus, Robert, Steven, ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		26		2023

Mailing Address 1717 N BAYSHORE DR APT 1636
Apt 1636City
MIAMIState
FLZip Code
33132-1153

FEC Identification Number

C

Transaction ID : SB21B.20174

Amount of Each Disbursement this Period

2019.29

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4362.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Lexis-Nexis t/a Accurant

Mailing Address P.O. Box 538358

City
AtlantaState
GAZip Code
30353-8358Purpose of Disbursement
Address - Phone Verifications

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20169

Amount of Each Disbursement this Period

76.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LogMeIn - GoToMyPC.com

Mailing Address 5385 Hollister Ave #111

City
Santa barbaraState
CAZip Code
93111-0000Purpose of Disbursement
Remote PC Access Annual Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20169

Amount of Each Disbursement this Period

540.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Master Print - Vomela, Inc.

Mailing Address PO Box 854537

City
MinneapolisState
MNZip Code
55485-4537Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20174

Amount of Each Disbursement this Period

172.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.19

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201693

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201694

See BB&T Truist Visa 04-30-23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address 890 Mountain Ave

City
New ProvidenceState
NJZip Code
07974-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20174

Amount of Each Disbursement this Period

132.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Meridian - Konica, Inc.

Mailing Address 1595 Spring Hill Rd Ste 450

City
ViennaState
VAZip Code
22182-0000Purpose of Disbursement
Copier - Monthly Printing and Maintenance

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20169

Amount of Each Disbursement this Period

11.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft Corp.

Mailing Address 1 Microsoft Way

City
RedmondState
WAZip Code
98052-8300Purpose of Disbursement
Software

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20165

Amount of Each Disbursement this Period

19.29

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.41

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201695

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201696

See BB&T Truist Visa 04-30-23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. OnlineNotary Net, Inc.

Mailing Address 110 Coliseum Xing # 5083

City
HamptonState
VAZip Code
23666-0000Purpose of Disbursement
Notary Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	9			2	0	2	3		

FEC Identification Number

C**Transaction ID : SB21B.20169**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. PA Dept. of Revenue

Mailing Address PO Box 281101

City
HarrisburgState
PAZip Code
17128-1101Purpose of Disbursement
PA - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3		

FEC Identification Number

C**Transaction ID : SB21B.20174**

Amount of Each Disbursement this Period

48.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PA Dept. of Revenue

Mailing Address PO Box 281101

City
HarrisburgState
PAZip Code
17128-1101Purpose of Disbursement
PA - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	2	3		

FEC Identification Number

C**Transaction ID : SB21B.20174**

Amount of Each Disbursement this Period

49.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

97.43

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201698

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4		2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20169

Amount of Each Disbursement this Period

311.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. PayPal Merchant Services

Mailing Address 2211 N. First St.

City
San JoseState
CAZip Code
95131-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0		2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20174

Amount of Each Disbursement this Period

207.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Postmaster - Alexandria Permits

Mailing Address 2226 Duke St

City
AlexandriaState
VAZip Code
22314-9998Purpose of Disbursement
Annual BRM Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4		2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20175

Amount of Each Disbursement this Period

290.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

497.44

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201699

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20175

Amount of Each Disbursement this Period

161.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. QuickBooks Payroll Service

Mailing Address PO Box 30015

City
RenoState
NVZip Code
89520-3015Purpose of Disbursement
Payroll Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20175

Amount of Each Disbursement this Period

22.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Safeguard Business Systems - Bradley

Mailing Address P.O. BOX 645626

City
CincinnatiState
OHZip Code
45264-5626Purpose of Disbursement
Fulfillment

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20177

Amount of Each Disbursement this Period

2046.69

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2231.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.

Mailing Address 510 Townsend Street

City
San FranciscoState
CAZip Code
94103-0000Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20175

Amount of Each Disbursement this Period

3825.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SurveyMonkey

Mailing Address 101 Lytton Avenue

City
Palo AltoState
CAZip Code
94301-0000Purpose of Disbursement
Survey Software Annual Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20170

Amount of Each Disbursement this Period

468.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Thexton, Matthew, A., Mr.,

Mailing Address 7219 Gordons Rd

City
Falls ChurchState
VAZip Code
22043-0000Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.20175

Amount of Each Disbursement this Period

1288.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5113.81

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201700

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201701

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

FEC Schedule B (Form 3X) Rev. 05/2016

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201702

See BB&T Truist Visa 04-30-23

Form/Schedule: SB21B

Transaction ID: SB21B.201703

See BB&T Truist Visa 04-30-23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Vanguard - Ascensus

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067Purpose of Disbursement
LP 401K Contributions & Match

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20176

Amount of Each Disbursement this Period

1178.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Vanguard - Ascensus

Mailing Address PO Box 28067

City
New YorkState
NYZip Code
10087-8067Purpose of Disbursement
LP 401K Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20176

Amount of Each Disbursement this Period

926.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.20176

Amount of Each Disbursement this Period

1.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2106.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2023

FEC Identification Number

C**Transaction ID : SB21B.20176**

Amount of Each Disbursement this Period

136.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Unemployment Company

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2023

FEC Identification Number

C**Transaction ID : SB21B.20176**

Amount of Each Disbursement this Period

0.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Virginia Dept. of Taxation

Mailing Address PO Box 26644

City
RichmondState
VAZip Code
23261-6644Purpose of Disbursement
VA - Withholding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2023

FEC Identification Number

C**Transaction ID : SB21B.20176**

Amount of Each Disbursement this Period

136.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

272.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 111

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Zoom Video Communications, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2023

Mailing Address 55 Almaden Boulevard, 6th Floor

City
San JoseState
CAZip Code
95113-0000Purpose of Disbursement
Video Conf Services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.20170**

Amount of Each Disbursement this Period

52.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

81359.32

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.201704

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

	21b		22		23		26		27
	28a		28b		28c	x	29		30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

 Memo Item

Memo Item

X Memo Item

407.68

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB29

Transaction ID : SB29.201684

See BB&T Truist Visa 04-30-23

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 111

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dominion Virginia Power

Mailing Address PO Box 26543

City
RichmondState
VAZip Code
23290-0001Purpose of Disbursement
Headquarters Account - Electric

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2023

FEC Identification Number

C**Transaction ID : SB29.201715**

Amount of Each Disbursement this Period

271.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Round House Sq UOA

Mailing Address 6231 Leesburg Pk #100

City
Falls ChurchState
VAZip Code
22044-0000Purpose of Disbursement
Headquarters Account - Association Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		01		2023

FEC Identification Number

C**Transaction ID : SB29.201753**

Amount of Each Disbursement this Period

210.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

481.27

TOTAL This Period (last page this line number only).....▶

888.95

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 110 OF 111

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aiken, David, , ,

Nature of Debt (Purpose):

Civi-CRM & Campaign Support

Mailing Address 1240 N Ogden St #4

City
DenverState
COZip Code
80218-0000

Outstanding Balance Beginning This Period

1230.00

Transaction ID : SD10.198081

Amount Incurred This Period

0.00

Payment This Period

1230.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fresh IP PLC

Nature of Debt (Purpose):

Legal Fund Account - Legal Action

Mailing Address 10044 Bee Apple Plc

City
MechanicsvilleState
VAZip Code
23116-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.201767

Amount Incurred This Period

1093.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1093.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Johnston, Robert, S., Mr., III

Nature of Debt (Purpose):

Contract Labor Admininstration

Mailing Address PO Box 1633

City
Bel AirState
MDZip Code
21014-7633

Outstanding Balance Beginning This Period

324.00

Transaction ID : SD10.198083

Amount Incurred This Period

0.00

Payment This Period

324.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1093.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 111 OF 111

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Redpath, William, B., Mr.,

Nature of Debt (Purpose):

Travel Expenses

Mailing Address 1303 Westley Ln

City

West Dundee

State

IL

Zip Code

60118-3545

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.201768

Amount Incurred This Period

869.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

869.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Safeguard Business Systems - Bradley

Nature of Debt (Purpose):

Fulfillment Services

Mailing Address P.O. BOX 645626

City

Cincinnati

State

OH

Zip Code

45264-5626

Outstanding Balance Beginning This Period

2046.69

Transaction ID : SD10.198082

Amount Incurred This Period

0.00

Payment This Period

2046.69

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

869.76

2) TOTALS This Period (last page this line number only)..... ►

1962.76

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

1962.76